B 210A (Form 210A) (12/09)

United States Bankruptcy Court Southern District of New York

In re Lehman Brothers Holdings Inc., et al., Debtors.

Case No. <u>08-13555 (SCC)</u> (Jointly Administered)

PARTIAL TRANSFER OF CLAIM OTHER THAN FOR SECURITY

A CLAIM HAS BEEN FILED IN THIS CASE or deemed filed under 11 U.S.C. § 1111(a). Transferee and Transferor hereby give evidence and notice pursuant to Rule 3001(e)(2), Fed. R. Bankr. P., of the transfer, other than for security, of the claim referenced in this evidence and notice. Transferor waives its right to raise any objection to the transfer of the claim to Transferee, and Transferor waives its right to receive notice pursuant to Rule 3001(e), Fed. R. Bankr. P. of the transfer of the claim. Transferor consents to the substitution of Transferor by Transferee for all purposes in the above referenced bankruptcy cases with respect to the claim, including without limitation, for voting and distribution purposes. Transferor stipulates that an order of the Bankruptcy Court may be entered without further notice to Transferor transferring the claim to Transferee and recognizing Transferee as the sole owner and holder of the claim. Transferor hereby directs that all payments, distributions, notices and communications in respect of or with respect to the claim be made to Transferee.

HOWARD HUGHES MEDICAL INSTITUTE

Name of Transferee

Name and Address where notices to transferee should be sent:

Howard Hughes Medical Institute Attn: Investment Fund Services – HHMF502567 4000 Jones Bridge Road Chevy Chase, MD 20815 Telephone: 301-215-8713

Telephone: 301-215-8713 Email: ifundservices@hhmi.org

With a copy to: Serengeti Asset Management LP 632 Broadway, 12th Floor New York, NY 10012 Attn: Erin Rogers

Telephone: 212-672-2248

Email: sam.ops@serengeti-am.com

GOLDMAN SACHS LENDING PARTNERS LLC Name of Transferor

Amount of Claim Transferred: \$143,000.00

Date Claim Filed: October 30, 2009
Debtor: Lehman Commercial Paper Inc.

Court Claim # (if known): 59006

I declare under penalty of perjury that the information provided in this notice is true and correct to the best of my knowledge and belief.

HOWARD HUGHES MEDICAL INSTITUTE

Transferor/Transferor's Agent

By: Jenny Zimmenny Transferee Transferee's Agent	Date: 2/21/14
Penalty for making a false statement: Fine of up to \$500,000 or impri	isonment for up to 5 years, or both. 18 U.S.C. §§ 152 & 3571.
Agreed and acknowledged:	
GOLDMAN SACHS LENDING PARTNERS LLC	
By:	Date:

I declare under penalty of perjury that the information provided in this notice is true and correct to the best of my knowledge and belief.

HOWARD HUGHES MEDICAL INSTITUTE

By: Transferee/Transferee's Agent	Date:
Penalty for making a false statement: Fine of up to \$500,000 or imprisonment	t for up to 5 years, or both. 18 U.S.C. §§ 152 & 3571
Agreed and acknowledged:	
GOLDMAN SACHS LENDING PARTNERS LLC	
By:Transferor/Transferor's Agent	Date: 421 14